	Complete if Known			
Substitute for Form 1449 A & B/PTO	Application Number	10/807,265		
INFORMATION DISCLOSURE	Confirmation Number	4118		
	Filing Date	March 24, 2004		
OTT STATEMENT DI MITEMENT	First Named Inventor	Yuichi KOMACHI		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT  Local State of the stat	Art Unit	2877		
_ A TABLE III	Examiner Name	Not Yet Assigned		
Sheet 1 of 1	Attorney Docket Number	Q80643		

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Examiner Initials*	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city, and/or country where published.	Translation
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Examiner Signature	/Kara Geisel/ (05/17/2006)	Date Considered	
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<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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